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A method for finding optimal location for an optometric practice

Abstract

Students graduating from schools of optometry, and established optometrists who desire to relocate need a systematic approach to determine an optimal location for their practices. This project demonstrates a method of finding that optimal location with an example of its application. The process is compared to performing a complete vision examination including case history, data collection, analysis, diagnosis, and treatment. Key factors considered are personal and professional goals, economics of the potential location, and practice opportunities in the area.

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**A METHOD FOR FINDING THE OPTIMAL
LOCATION FOR AN OPTOMETRIC PRACTICE**

By

BRENT W. FIDLER

KODI T. FIDLER

A Thesis submitted to the faculty of the
College of Optometry
Pacific University
Forest Grove, Oregon
for the degree of
Doctor of Optometry
May, 1993

Advisor:

Steven K. Fletcher

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Brent W. Fidler
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Steven K. Fletcher
(advisor)

AUTHOR BIOGRAPHIES

Kodi Teegarden Fidler

I was born and raised in Longmont, Colorado and graduated with honors from Longmont High School in 1986. I earned a Bachelor of Science degree in biology from Colorado State University in Fort Collins in 1990. I was recognized as a member of Outstanding College Students of America in 1987 and in 1988. I earned the Colorado Scholars Award in 1988 and received a certificate from Phi Kappa Phi in 1988.

I entered Pacific University College of Optometry in August, 1989 and plan to graduate with a Doctorate of Optometry degree in May, 1993. I plan to return to Colorado to practice as an associate or partner in a group practice with my husband, Brent, specializing in Vision Therapy and Primary Care, full scope optometry.

Brent William Fidler

I was born in Frankfort, Indiana and grew up in Henry, Illinois. After graduating with honors from Henry Senachwine High School in 1986, I moved to Lander, Wyoming and attended Central Wyoming College in Riverton. In 1987 I was awarded the Presidential Scholarship Award and was inducted into Phi Theta Kappa. I earned an Associate of Science degree from Central Wyoming College in May, 1989 and entered Pacific University College of Optometry in August, 1989. I was awarded the Presidential Scholarship Award in 1990 and completed a Bachelor of Visual Science degree in 1991 during my second year of optometry school. I plan to graduate with a Doctorate of Optometry degree in May, 1993.

My future plans include practicing full-scope optometry in a private setting in Colorado as an associate, or purchasing a practice with my wife, Kodi.

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We would like to thank Steven K. Fletcher for taking the time to advise us on this thesis project. His willingness to share his knowledge in demographic and economic research is greatly appreciated. Furthermore, his encouraging words regarding the fearful prospect of leaving the protective world of academia after 19 years to enter the exciting field of optometry will not be forgotten. Thank you, Steve!

A METHOD FOR FINDING THE OPTIMAL LOCATION FOR AN OPTOMETRIC PRACTICE

by: Kodi Teegarden Fidler and Brent W. Fidler

ABSTRACT

Students graduating from schools of optometry, and established optometrists who desire to relocate need a systematic approach to determine an optimal location for their practices. This project demonstrates a method of finding that optimal location with an example of its application. The process is compared to performing a complete vision examination including case history, data collection, analysis, diagnosis, and treatment. Key factors considered are personal and professional goals, economics of the potential location, and practice opportunities in the area.

INTRODUCTION

In the State of the Profession 1992 report in the October issue of Optometric Economics,¹ Bennett and Aron report interesting facts and figures pertinent to this thesis project:

"Today there are 27,000 full time equivalent optometrists in practice in the United States, of which 70 percent are in private optometric settings."

"One-third of the profession has established practices in communities of under 25,000 people. One-third practice in either urban or suburban communities of between 25,000 and 100,000 people, and the remaining third practice in urban or suburban communities of 100,000 or more. Nationally, there are 10.4 practicing optometrists per 100,000 population."

"The 16 U.S. schools and colleges of optometry graduate about 1,100 new optometrists per year. Attrition is estimated at about 600 O.D.s each year. At this rate, by the year 2000 the number of practicing optometrists will approach 31,000."

Considering these figures, it is important now more than ever to start a practice on the right foot. That foot should be placed in the best location possible. Students graduating from schools of optometry, and established optometrists who desire to relocate need a systematic approach to determine an optimal location for their practices. This project will demonstrate a method of finding that optimal location. The process will be compared to performing a complete vision examination including case history, data collection, analysis, diagnosis, and treatment. Key factors to consider are personal and professional goals, economics of the potential location, and practice opportunities in the area.

Often, the most difficult part of this major decision process is getting started. You must realize that it will take a considerable amount of time and energy to conduct the kind of research necessary to make such a lifelong decision. David L. Park, O.D., M.S. presents an outline to his students at Southern California College of Optometry which involves one entire year of careful planning from the time you decide to open a practice to the time the doors are actually opened for business.² Using a systematic approach will help smooth the road to accomplishing this transition.

A review of the information already presented on the subject reveals many similar suggestions: Look at population trends, age distribution, per capita income, number of industries, and number of eyecare practitioners already present in the area. None of them show or tell the reader how to fill in the blanks, or what the criteria are for accepting or rejecting a particular area. The following project will fill in some of those blanks by setting up a model with templates for collecting and analyzing data gathered during research. A few areas in the state of Colorado will be analyzed as a sample application of the model.

CASE HISTORY

During the case history of a vision exam, the doctor elicits from the patient the "chief complaint," or main reason for coming to have his/her eyes checked. Responses are explored in depth, eventually arriving at the patient's goals for the visit. From this information, the doctor can determine a list of potential diagnoses and establish a plan for testing and data collection to rule in or out each diagnosis. Similarly, the practitioner looking for a place to practice needs to establish personal and professional goals taking into account family considerations as well as community needs. From these goals, a potential list of communities can be created and the same testing plan can be used for each one to rule in or out practice location possibilities.

The Pathways manual³ advocates establishing SMART goals. These are Specific, Measurable, Achievable, Realistic, and Time-bound goals. Professional goals are easy to put into such a format, especially mode and scope of practice, community involvement, insurance and retirement plans, among others. Some personal goals also lend themselves to this format including family planning, exercise programs, recreation and vacation plans, and home purchase or improvements. The important thing is to think them over and get them down on paper so that you have them to draw from and refer to when finding a place to practice.

Along with these SMART goals, some general considerations must also be included. Professional considerations include community status of O.D.'s, study group activities, effectiveness of state and/or local associations and societies, general attitude of cooperation from other health care professionals, steps toward licensure, and the willingness of schools to cooperate in screenings.⁴ You must also consider the decision to commute or live in the community where the practice is located. This decision will influence your personal life as well. The more involved a doctor can become in the community, the greater the potential for increased referrals. However, some doctors prefer to commute in order to divorce themselves from business matters when the day is through.⁵ In smaller

communities, the best way to survive is to locate in a town with the idea that you are going to live there for the rest of your life, and to make your practice part of that town.⁶

That town should be one that fits you rather than you trying to fit into it. Make a list of things you want a community to offer. See Table 1 for suggestions to get you started. In general, consider proximity to family ties, cultural background, opportunities for post-graduate study, cultural facilities, and climate.⁷ Furthermore, "in today's society, employment opportunities for a working spouse deserve serious thought. There must be a balance between your practice success and your family's happiness with home life."⁵

Try to narrow your choices down to the fewest possible locations. For these few locations you should consider more specific living conditions. You want neighbors to be near your own social status with similar tastes and interests. You want homes available at a price you can afford. Schools should have solid foundations for learning. You may also want to look at churches, recreation, and shopping facilities.⁷ Healthcare facilities may also be of concern to you and your family. In rural communities, the county seat is usually the town where you will find modern health care facilities.

Table 1

WHAT YOU WANT A COMMUNITY TO OFFER

Clean Water	Near Golf Courses
Clean Air	Museums Nearby
Low Crime Rate	Quality Restaurants
Availability of Hospitals	Major League Sports Teams
Inexpensive Cost of Living	Local Symphony Orchestras
Low Housing Prices	Close to Colleges
Good Public Schools	Proximity to a Big Airport
Near Lakes, Oceans	Amtrak Service
Skiing Close By	Public Transportation
National Forests or Parks	Near Place of Worship
Major Zoos or Aquariums	Close to Relatives

DATA COLLECTION

Continuing with the eye examination analogy, data collection begins following the case history, although the case history continues throughout the exam. It is most cost effective to gather the maximum amount of information with the fewest number of tests in the least amount of time without sacrificing quality of service. However, when analyzing a community, the more data you gather by visiting the community several

times, the better chance you have of succeeding in that community. Be purposeful, deliberate, and scientific and use a process of systematic data gathering to establish three kinds of indicators; an index for economic stability, one for how it rates as a place to live, and one for what kind of patient potential the community offers.⁸

To set up an index for economic stability, obtain from each city's Chamber of Commerce a copy of the U.S. Economic Census reports for the area and other recent economic reports³ (Form 1). Evaluate population trends, new building construction, new business starts, and unemployment rate. Chambers of commerce tend to be optimistic and may leave out some unfavorable features. Their purpose is to attract people to the area and make it look good. This initial inquiry will lead to further contacts in the community because your address will be shared with local bankers and real estate agents who will send you letters of introduction.

James R. Gregg, O.D. suggests visiting a banker and asking for economic information. A banker will be more conservative, and such an exploratory visit will be a good way to get acquainted, since you will be needing a bank for your business.⁸ Take a look at the banking situation in the area. It is a good sign of a healthy economy if there are several progressive banks, as they have already spent time and money on economic research.⁶

Other sources for obtaining economic and demographic information include the public library where you will find a publication called the Rand McNally Commercial Atlas and Marketing Guide.⁹ It contains current population, income, and sales data for each state by county. Another helpful publication is the Sales and Marketing Management volumes including a Survey of Buying Power and a Survey of Media Markets.¹⁰ If the library is a government document depository, it also houses U.S. Census Bureau publications. The U.S. Department of Commerce has a regional publication called the State and Metropolitan Area Data Book.¹¹ All of these publications can be easily obtained with the help of the librarian at a large library, especially if it is associated with a college or university.

State and local government offices also have this information available, sometimes for a small fee. The Division of Local Government, Department of Local Affairs will send information requested by telephone. They will also send a catalog and order form for any other information you may require.

A wealth of information can be obtained from small business associations, homebuilders associations, public service companies, and large retail chains. Call the local retail chain stores and ask for the marketing department or facility development section. They will usually be happy to help because business is good for business.

To evaluate the quality of life, visit each community and rate it against the others. Take notes and have a separate file for each community. Make judgements while the information is fresh in your mind.⁸ Assign numerical values for each factor rated using a scale of 1 to 5 with 5 being the best^{2,8} (Table 2). Inquire about schools and churches. Talk to teachers, students, and parents. Try out the cultural and recreational activities. Find out about social clubs, civic groups, and service clubs. Talk to real estate agents to find out about housing availability with the amenities you desire at a price you can afford. Read local papers, ask waitresses and clerks for their opinions of the community, and listen to local radio. Your public library may have the Gale Directory of Publications and Broadcast Media which lists names and addresses for all of the radio stations, newspapers, and publications for each state by city.¹²

When you visit the community, go to the local unemployment office to learn if there is a large body of permanently unemployed or if employment is highly seasonal, both of which are unfavorable signs.⁷ Walk through the neighborhoods and look for "For Sale" signs and empty houses.⁸ If industries are moving out of the area, find out the reasons from the city's planning department or industrial development department.³ On the positive side, look for new industrial parks and new transportation facilities. If these are being built, continued prosperity and population growth are indicated.⁷

Talk to dentists, pharmacists, and lawyers to learn more about the community's ability to support professionals in business. Visit the local real estate agents to learn about office space availability. Consider size, location, visibility, and handicap accessibility. Explore buying and leasing options. Compare average cost per square footage of commercial real estate in each community.

Information gathered from these professionals will be used to develop an index for practice potential. Information about optometrists is printed in the Blue Book of Optometry¹⁴ and some state optometric associations publish directories. Information about ophthalmologists is printed in the Red Book of Ophthalmology¹⁵ Ask for copies of the yellow pages of the three O's when you request information from chambers of commerce. If this information is not sufficient, write each of the practitioners a letter requesting more information and informing them that you will call to ask these questions in a couple weeks (Form 2). Or simply schedule an appointment and pay them a visit. These doctors may not all be honest because they may view you as potential competition, but hopefully they will be cooperative.

Ophthalmic lab representatives also have a good idea about eyecare needs and practice potential. They are usually well represented at major optometric meetings and you can collect their business cards to contact them later for information you desire.

The other major factor to consider for the practice potential index is the patient base. Learn from realtors whether the population numbers fluctuate with seasons and tourism. Do people have seasonal homes in the community, or will you be able to rely on permanent residents? Find out about the drawing area even outside city limits. Do people shop and play in the area or tend to go elsewhere for some services? Identify public transportation to get to shopping areas.⁸ Patients tend to get their vision care where they do their shopping.⁷ Consider the possibility of large companies in the area providing eye-care benefits to their employees.³ This could enhance or limit your patient base depending upon whether you are a provider for them or not.

ANALYSIS

By now, the amount of data collected probably seems overwhelming. However, remembering back to optometry school, you learned every possible test to perform on a patient and three or four different types of analyses. You now know that you do not need every single test for each patient and you do not perform all forms of analysis. In our examination of communities, not all of the suggested means for gathering information will be necessary for every community, and by keeping things organized and in perspective, the analysis will not be too difficult. "There is no formula for how much construction there must be, the volume of bank deposits, employment rate and so on to indicate when an O.D. can make it" but you can make comparisons between the locations you are considering.⁸

Having narrowed down the choices of communities to only a few, and having kept a separate file for each one will make the analysis easier. First, organize the data into a table of usable form (Table 3). Then, using the scale of 1 to 5, assign values for the factors rated for the economic and practice potential indices, similar to what was done for the subjective analysis of the livability index (Table 2). Blank copies of both tables have been provided for the reader to photocopy and use. Of course, some categories may be deleted or added at the reader's discretion.

As an example of the methods used for data collection and analysis, we analyzed two large cities in Colorado. We also compared three small cities in the same state, but in separate counties. At times, we found it necessary to use county data to make comparisons because some of the information was not readily available for each of the small cities.

TABLE 2

COMMUNITY RATING INDICES

If you've narrowed your choice down to three possible cities, score 3 for the most favorable in each category, 2 for the next, and 1 for the least. (For four communities, start with 4; for five, 5 etc.)

COMMUNITY:	A	B	C	D	E
	(Large cities)			(Small cities)	
ECONOMIC INDEX					
Population growth 1980-1990	1	2	1	2	3
Projected growth 2000.....	1	2	1	2	2
Retail sales per capita.....	1	2	1	3	2
Buying power.....	2	1	1	2	3
Per capita income.....	2	1	1	3	2
Diversified economy.....	2	1	2	1	3
Unemployment rate	1	2	3	2	1
TOTAL:	10	11	10	15	16
LIVABILITY INDEX					
Schools.....	1	2	3	1	2
Churches.....	1	2	2	1	3
Cultural and recreational.....	2	1	3	2	1
Housing and neighborhood.....	2	1	3	1	2
Community organizations.....	1	2	3	1	2
Shopping facilities.....	2	1	2	1	3
Climate.....	2	1	1	2	3
General feeling.....	1	2	3	1	2
TOTAL:	12	12	20	10	18
PRACTICE POTENTIAL					
O.D./population ratio.....	2	1	1	3	2
Vision care need.....	2	1	2	1	3
Types of practices.....	2	1	3	1	2
Office space availability/cost.....	1	2	3	1	2
Attitude of professionals.....	2	1	1	3	2
Ophthalmic lab opinions.....	2	1	1	2	3
TOTAL:	10	5	11	11	14
GRAND TOTAL:	32	28	41	36	48

Table 3

	Large Cities		Small Cities		
	A	B	C	D	E
Current Population(1990)	281,140	87,758	4,636	5,049	6,561
Percentage Growth (1980-1990)	30.70%	44.80%	-19.86%	37.28%	41.49%
Projected Growth (2000)	25.20%	60.20%			
Per Capita Income	\$15,463.00	\$14,837.00		\$30,027.00	\$14,732.00
Unemployment Rate	7.30%	5.60%	4.85%	2.90%	3.60%
Housing Costs (median value)	\$81,900.00	\$85,000.00	\$64,600.00	>\$500,000.00	\$105,100.00
Homeowner Vacancy Rate	4.20%	2.00%	3.90%	3.20%	0.70%
Rental Costs (median value)	\$360.00	\$376.00	\$258.00	\$717.00	\$418.00
Rental Vacancy Rate	14.10%	4.60%	8.50%	19.90%	2.30%
Office Space Cost (per sq. ft.)	\$3-15	\$10-14	\$5-7	\$6-10	\$9-18
Retail Sales Per Capita	\$9.19	\$9.82	\$12.13		
Effective Buying Income (Household)	\$25,245.00	\$22,706.00			
Age Distribution:					
Under 5	8.43%	7.04%	5.35%	4.00%	6.66%
5 to 17	18.38%	15.40%	11.07%	7.55%	16.58%
18 to 20	4.39%	10.58%	25.26%	1.90%	3.72%
21 to 24	6.59%	11.64%	15.42%	9.76%	4.31%
25 to 44	36.34%	35.28%	24.65%	53.65%	39.37%
45 to 54	9.59%	7.36%	6.19%	12.42%	5.37%
55 to 64	7.11%	4.98%	4.85%	6.08%	7.71%
65 to 74	5.58%	4.22%	3.86%	3.13%	6.40%
75 to 84	2.69%	2.56%	2.35%	1.27%	3.93%
85 and over	0.91%	0.95%	0.99%	0.24%	1.37%
Median Age	31.1	27.8	22.8	34.5	35
Ethnic Distribution:					
White	85.90%	93.30%	96.18%	96.71%	97.38%
Black	7.02%	0.98%	0.99%	0.30%	0.26%
Hispanic	9.13%	7.06%	5.33%	4.73%	4.12%
Indian	0.83%	0.52%	0.84%	0.48%	0.49%
Asian or Pacific Islander	2.43%	2.39%	0.60%	1.45%	0.49%
Other	3.81%	2.81%	1.38%	1.07%	1.39%
Optometrists	34	15	3	2	3
Ophthalmologists	12	8	0	3	1
Optometrists/Population Ratio	1/8269	1/5851	1/1545	1/2525	1/2187

Table 3 (cont'd)

	Counties			State
	C	D	E	Colorado
Current Population(1990)	10,273	12,661	29,974	3,294,394
Percentage Growth (1980-1990)	-3.89%	22.47%	33.13%	13.29%
Projected Growth (2000)	6.86%	13.88%	9.96%	9.97%
Per Capita Income	\$12,072.00	\$15,363.00	\$12,622.00	
Unemployment Rate			5.50%	
Housing Costs (median value)	\$79,000.00	\$452,800.00	\$90,400.00	\$82,700.00
Homeowner Vacancy Rate	4.40%	3.60%	2.10%	3.30%
Rental Costs (median value)	\$297.00	\$663.00	\$359.00	\$362.00
Rental Vacancy Rate	19.50%	13.30%	6.20%	11.40%
Office Space Cost (per sq. ft.)				
Retail Sales Per Capita	\$6.36	\$18.09	\$8.24	
Effective Buying Income (Household)	\$24,696.00	\$29,008.00	\$30,537.00	
Age Distribution:				
Under 5	6.48%	5.59%	8.12%	7.68%
5 to 17	14.27%	11.25%	19.47%	18.47%
18 to 20	13.39%	1.99%	3.89%	4.50%
21 to 24	10.08%	6.91%	4.58%	5.69%
25 to 44	34.82%	50.82%	37.16%	35.82%
45 to 54	8.58%	13.01%	9.59%	10.22%
55 to 64	5.98%	6.03%	7.24%	7.64%
65 to 74	3.84%	3.08%	5.79%	5.90%
75 to 84	1.94%	1.13%	3.15%	3.10%
85 and over	0.62%	0.19%	1.00%	1.00%
Median Age	28.2	34.8	32.8	32.5
Ethnic Distribution:				
White	97.43%	97.37%	97.24%	88.19%
Black	0.60%	0.30%	0.27%	4.04%
Hispanic	3.60%	3.80%	5.58%	12.88%
Indian	0.70%	0.40%	0.72%	0.84%
Asian or Pacific Islander	0.50%	1.10%	0.41%	1.82%
Other	0.82%	0.81%	1.35%	5.10%

To analyze the data in Table 3 for practice potential index, first start with the current population and use it to set up the optometrist/population ratio. When analyzing small towns, consider the population of the county in which the community is located. Remember that the literature suggests 1/7,000 as a healthy ratio for a community. Compare the percentage growth and projected growth of each area. Obviously, the higher the growth, the better chance you have of experiencing growth in your practice. Determine the need for optometric services by considering the growth rate of the community, age of practitioners, age distribution of the population, and the scope of services already being offered.¹³ For example, City C has the highest population of children compared to the other small cities and would benefit from a pediatric practice if this need is not being met. City D has the highest percentage of people in the middle ages who don't necessarily need as much eye care as the children or the elderly, but they may benefit from a contact lens specialty practice.

If a community does need your services, you will need an office in which to establish your practice. Analyze the cost per square foot of commercial office space and its availability in each community. Some figures are gross rent which includes utilities and maintenance while others represent only a base rent for the space.

To set up the economic index, unemployment rate and per capita income tell you if the people in the community are employed and whether they can afford to pay for your services. Of the small cities, City D has the lowest unemployment rate and the highest per capita income. Retail sales per capita and effective buying income also reflect the economic health of the people in the community. City D has the highest retail sales per capita, and City E has the highest buying power. You must also analyze housing and rental costs. If the people of the community have low housing costs, then they may have a relatively higher buying income. All of these numbers are inter-related, but breaking them down and putting them into the index table will help you assemble the total picture.

Housing and rental costs along with homeowner and rental vacancy rates contribute to the livability index. City C has the most affordable housing with the highest homeowner vacancy rate. It also has the most affordable rental costs. City D has the highest rental vacancy rate which is probably a reflection of its high rental costs. Remember that housing is a subjective index and varies for each individual based on desired amenities.

DIAGNOSIS AND TREATMENT

The data has been collected and analyzed and now it is time to make a diagnosis. Compare the indices of all of the communities analyzed and determine the one with the highest numbers. It will be the most optimal location for a practice. Of course, compromises in desired criteria may need to be made. One community may have the highest index for economic stability and perhaps the lowest index for livability. It comes down to your own personal and emotional choice.

Based on our analysis and personal emotions, we have chosen City E as the community in which we plan to establish our practice. Of the small cities, it rated the highest in economic index and practice potential index, and was a close second in livability index. City C rated higher in livability index, but only by two points, and its other two indices were much lower. We analyzed the larger cities for the purpose of demonstration of analysis. City A would be our first choice of the two, but we would prefer to live in a small town.

Once the diagnosis is made of which community is the best, the treatment becomes obvious: Move to the location and set up practice. This requires more research and another step-by-step systematic process.

CONCLUSION

We have included a checklist which summarizes the systematic approach of finding the optimal location for an optometric practice established in this thesis project (Form 3). Carl M. Caplan, O.D. states that, "There can never be a 100 percent guarantee for predicting business success, but you should do everything you can to swing the pendulum in a positive direction."⁵ Success requires careful planning and an efficient strategy, and by utilizing this particular approach, you will have increased your chances of success. You will have considered personal and professional goals, economics and demographics of the area, and practice potential of the community. You will have taken the time to collect and analyze enough data to make an informed decision about where to spend most of the rest of your professional life.

Form 1

Your Name
Address
Phone Number

Date

Chamber of Commerce
Main Street
Anytown, USA

To Whom It May Concern:

Would you please send me information about _____ ? I am interested in the population trends for the last 5-10 years including age breakdowns, marital status, ethnic breakdown, and overall education levels. Helpful information would also include an economic profile of the community including unemployment rate, new business starts and types of businesses and industries. I am also interested in new building construction including housing starts, office building construction, development of new or expanded shopping centers, banks, and restaurants.

Furthermore, I would appreciate any information about the current eyecare providers in your city. If possible, please send me a photocopy of the yellow pages that list optometrists, ophthalmologists, and opticians for the area.

Thank you very much for your help. If you have any questions, please let me know.

Sincerely,

Your Name

Form 2

Your Name
Address
Phone Number

Date

Dr. Optometrist
Main Street
Anytown, USA

Dear Dr. Optometrist,

I am a recent graduate of Your College of Optometry in search of the optimal location for an optometric practice. I am utilizing an organized and systematic strategy for comparing a few selected communities. Some of the factors I am considering include the amount and types of eye care available in the area, and the patient base that currently utilizes those services.

I will be calling you one week from today for a short conversation regarding these factors. I am interested in the mode and scope of your practice, age of your practice and the size of your patient base. This information, and any other ideas or suggestions that you might have will be very helpful and appreciated. Thank you in advance for your time and assistance. I look forward to speaking with you or your staff.

Sincerely,

Your Name

FORM 3

CHECKLIST

- ___ 1. Write out personal and professional goals.
- ___ 2. Make a list of things you want a community to offer.
- ___ 3. Make a list of communities you wish to explore.
- ___ 4. Mail letters to Chambers of Commerce.
- ___ 5. Visit your public library to obtain demographic information from the following books:
 - a. Rand McNally Commercial Atlas and Marketing Guide
 - b. Sales and Marketing Management
 - c. State and Metropolitan Area Data Book
 - d. Use the Gale Directory of Publications and Broadcast Media to find addresses of local newspapers and local radio frequencies.
- ___ 6. Contact state and local government offices for more information. (For Colorado, the Division of Local Government, Department of Local Affairs had useful information.)
- ___ 7. Obtain Blue Book of Optometry and Red Book of Ophthalmology.
- ___ 8. Contact the state optometric association and request copy of directory.
- ___ 9. Visit the community:
 - a. Find out about schools and churches from teachers, parents, and students.
 - b. Try out cultural and recreational activities.
 - c. Visit the banks.
 - d. Talk with real estate agents.
 - e. Talk with pharmacists, dentists, and lawyers.
 - f. Visit the local unemployment office.
 - g. Talk with representatives from local ophthalmic labs.
- ___ 10. Call or visit local optometrists and ophthalmologists.

TABLE 2 BLANK

COMMUNITY RATING INDICES

If you've narrowed your choice down to three possible cities, score 3 for the most favorable in each category, 2 for the next, and 1 for the least. (For four communities, start with 4; for five, 5 etc.)

COMMUNITY:	A	B	C	D	E
ECONOMIC INDEX					
Population growth 1980-1990...	-----	-----	-----	-----	-----
Projected growth 2000	-----	-----	-----	-----	-----
Retail sales per capita	-----	-----	-----	-----	-----
Buying power	-----	-----	-----	-----	-----
Per capita income	-----	-----	-----	-----	-----
Diversified economy	-----	-----	-----	-----	-----
Unemployment rate	-----	-----	-----	-----	-----
TOTAL:	-----	-----	-----	-----	-----
LIVABILITY INDEX					
Schools	-----	-----	-----	-----	-----
Churches	-----	-----	-----	-----	-----
Cultural and recreational	-----	-----	-----	-----	-----
Housing and neighborhood	-----	-----	-----	-----	-----
Community organizations	-----	-----	-----	-----	-----
Shopping facilities	-----	-----	-----	-----	-----
Climate	-----	-----	-----	-----	-----
General feeling	-----	-----	-----	-----	-----
TOTAL:	-----	-----	-----	-----	-----
PRACTICE POTENTIAL					
O.D./population ratio	-----	-----	-----	-----	-----
Vision care need	-----	-----	-----	-----	-----
Types of practices	-----	-----	-----	-----	-----
Office space availability/cost...	-----	-----	-----	-----	-----
Attitude of professionals	-----	-----	-----	-----	-----
Ophthalmic lab opinions	-----	-----	-----	-----	-----
TOTAL:	-----	-----	-----	-----	-----
GRAND TOTAL:	-----	-----	-----	-----	-----

Table 3 blank

	A	B	C	D	E	F	G
1		City A	City B	City C	City D	City E	State
2	Current Population(1990)						
3	Percentage Growth (1980-1990)						
4	Projected Growth (2000)						
5	Per Capita Income						
6	Unemployment Rate						
7	Cost of Living Index (comp. to nat.)						
8	Housing Costs (median value)						
9	Homeowner Vacancy Rate						
10	Rental Costs (median value)						
11	Rental Vacancy Rate						
12	Office Space Cost (per sq. ft.)						
13	Retail Sales Per Capita						
14	Effective Buying Income (Household)						
15	Age Distribution:						
16	Under 5						
17	5 to 17						
18	18 to 20						
19	21 to 24						
20	25 to 44						
21	45 to 54						
22	55 to 64						
23	65 to 74						
24	75 to 84						
25	85 and over						
26	Median Age						
27	Ethnic Distribution:						
28	White						
29	Black						
30	Hispanic						
31	Indian						
32	Asian or Pacific Islander						
33	Other						
34	Optometrists						
35	Ophthalmologists						
36	Optometrists/Population Ratio						

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